

Non-Standard Testing Version:1

Non-Standard Testing Request for the Tennessee Bar Examination

Eligibility Questionnaire

NCBE #:

First Name: Middle Name: Last Name:

I am applying to take the Bar Examination to be administered in:

February July

1. (a) Are you legally deaf or hard of hearing?	<input type="radio"/> Yes <input type="radio"/> No
1. (b) Are you legally blind or visually impaired?	<input type="radio"/> Yes <input type="radio"/> No
2. (a) Do you have a physical disability? If yes, please explain:	<input type="radio"/> Yes <input type="radio"/> No
<input type="text"/>	
2. (b) Do you have a specific learning disability? If yes, please explain:	<input type="radio"/> Yes <input type="radio"/> No
<input type="text"/>	
2. (c) Do you have a psychological disability? If yes, please explain:	<input type="radio"/> Yes <input type="radio"/> No
<input type="text"/>	
3. Please indicate how long you have had the disability. Please add any helpful additional information in the box below.	<input type="radio"/> 1 year <input type="radio"/> 2 years <input type="radio"/> 3 years <input type="radio"/> 4 years <input type="radio"/> 5 years or more
<input type="text"/>	

PLEASE INCLUDE CURRENT DOCUMENTATION FROM A DOCTOR, PSYCHOLOGIST, PSYCHIATRIST OR OTHER APPROPRIATE PROFESSIONAL CERTIFYING YOUR

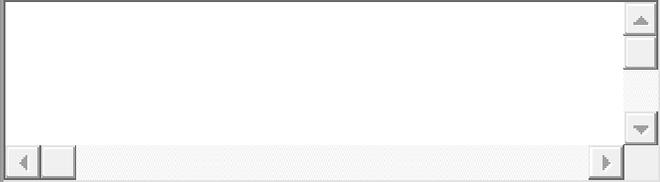
DISABILITY. ALSO INCLUDE DOCUMENTATION OF SPECIAL ACCOMMODATIONS RECEIVED DURING LAW SCHOOL. UPLOAD THESE ITEMS IN RELATED ITEMS AFTER YOU SUBMIT THIS APPLICATION.

4. Past Accommodations

A. In high school		
Were you in a special school or program?		<input type="radio"/> Yes <input type="radio"/> No
Did you get special accommodations for classroom tests?		<input type="radio"/> Yes <input type="radio"/> No
Did you generally get extra time for classroom tests?		<input type="radio"/> Yes <input type="radio"/> No
Please provide any addition explanation in the box below:		
<div style="border: 1px solid gray; height: 40px; width: 100%;"></div>		
B. Did you have special accommodations for taking the SAT or ACT examination for admission to college?		<input type="radio"/> Yes <input type="radio"/> No
C. In college		
Were you in a special school or program?		<input type="radio"/> Yes <input type="radio"/> No
Did you use disabled student services?		<input type="radio"/> Yes <input type="radio"/> No
Did you generally get extra time for exams?		<input type="radio"/> Yes <input type="radio"/> No
Please provide any additional explanations in the box below:		
<div style="border: 1px solid gray; height: 40px; width: 100%;"></div>		
D. Did you have non-standard testing for the LSAT? If yes, please specify all accommodations provided, including special materials:		<input type="radio"/> Yes <input type="radio"/> No
<div style="border: 1px solid gray; height: 80px; width: 100%;"></div>		
E. In law school		
Did you use disabled student services?		<input type="radio"/> Yes <input type="radio"/> No
Did you generally get extra time for exams?		<input type="radio"/> Yes <input type="radio"/> No
Please provide any additional explanations in the box below:		
<div style="border: 1px solid gray; height: 40px; width: 100%;"></div>		

PLEASE INCLUDE DOCUMENTATION OF SPECIAL SERVICES AND TESTING AWARDED BY

COLLEGE, LSAT AND LAW SCHOOL.

5. <i>I am requesting accommodations for the bar examination as follows:</i> (check all that apply):	
Special Format:	<input type="radio"/> Yes <input type="radio"/> No
Please check all that apply: Font size:	<input type="checkbox"/> Braille <input type="checkbox"/> Audio <input type="checkbox"/> Large type <input type="radio"/> 18 pt <input type="radio"/> 24 pt
Extra Testing Time:	<input type="radio"/> Yes <input type="radio"/> No
Please select one:	<input checked="" type="radio"/> Time and a half <input type="radio"/> Double time
Low Density Testing Environment:	<input type="radio"/> Yes <input type="radio"/> No
Glucose Testing equipment at table:	<input type="radio"/> Yes <input type="radio"/> No
Other (such as food at table or special seating in the general testing area) Please describe:	<input type="radio"/> Yes <input type="radio"/> No
	

IN A SEPARATE LETTER (UPLOAD IN RELATED ITEMS), PLEASE DESCRIBE YOUR SPECIFIC DISABILITY, WHEN AND HOW IT WAS FIRST IDENTIFIED, AND THE ACCOMMODATIONS YOU ARE REQUESTING BECAUSE OF IT.

This form must be completed and current documentation Submitted, each and every time you apply for the Tennessee bar examination.

The combination of my login, password and typed named below constitutes my signature with the same effect as if signed and notarized. By so signing, I certify that all of the above and supplementary information is correct to the best of my knowledge. I agree to notify the Tennessee Board of Law Examiners (TBLE) of any changes or additions to the information previously provided. I understand that failure to respond fully and accurately to the questions included on herein or to inform the TBLE and NCBE of any changes may result in denial of my request.

Full Typed Name of Applicant:

REMINDER: AFTER SUBMISSION OF YOUR APPLICATION, RETURN TO YOUR PROFILE AND CLICK THE DETAILS LINK NEXT TO THE APPLICATION IN ORDER TO UPLOAD SUPPLEMENTAL ITEMS. When providing additional information to supplement answers, give information in the same manner as called for in the application and upload in the Additional Documentation as Requested Item. After submitting your application, you will find a "Details" link next to this application in your profile. There you will find the "Related Items" tab, which will provide you an upload link.

